|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Teacher:\_\_\_\_\_\_** | | | **Grade:\_\_ \_\_\_\_\_\_\_\_\_** | **Lesson Plan for the Week of:** | | |
|  | **Whole Group** | **Small Groups** | **Independent Work** | **Assessment** | **Spiral/ Review** | **Video/ Smart Board Activities/Technology**  **Materials Needed**  **Reflection Notes**  **READING GROUPS** |
| **Monday** |  |  |  |  |  |
| **Tuesday** |  |  |  |  |  |
| **Wednesday** |  |  |  |  |  |
| **Thursday** |  |  |  |  |  |
| **Friday** |  |  |  |  |  |